



Substance Abuse News

Spring 2000

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Women's Substance Abuse Treatment Awards

In the 1999-2001 Biennial Budget, over \$10 million in funds were designated for substance abuse treatment services for women and Temporary Assistance for Needy Families (TANF) eligible individuals through proposals for two separate grant offerings: (1) Statewide Urban/Rural Women's AODA and TANF Eligible Individuals Treatment and (2) Milwaukee County TANF Eligible Individuals AODA Treatment.

On January 14, 2000, the Department of Health and Family Services, in cooperation with Department of Workforce Development, announced the eight awards for services to 16 counties and one tribe for provision of substance abuse treatment services to women and TANF-eligible individuals. (See **Awards** on page 9.)

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From left: Secretary Lee, Michael Hert, Sandra Kohn

Governor and DHFS Secretary Recognized by International EAPA

Governor Tommy G. Thompson and Department of Health and Family Services (DHFS) Secretary Joe Lee were recognized by the International Employee Assistance Professionals Association (EAPA) for promoting employee assistance programs and drug free workplace initiatives in Wisconsin. Secretary Lee is Chairperson of the State Council on Alcohol and Other Drug Abuse. Also attending the Madison ceremony were Sandra Kohn, employee assistance

director for the City of Madison, and Michael Hert, Chairperson of the SCAODA Intervention and Treatment Committee. Hert represented SCAODA during the awards presentation at the International Employee Assistance Professionals Association Conference in Orlando, Florida. Employee Assistance Programs, which assist employees and their families in preventing, resolving or better managing problems that could impact on personal well being and/or productivity, have been estimated to save employers \$5 to \$16 for every dollar invested. Three Wisconsin EAPA chapters (North Central, Southern and South Central) also received awards for their "collaborative and diligent work in the promotion, education, and advocacy of EAP."

Methamphetamine: A “Club Drug”

In a Community Drug Alert Bulletin by the National Institute on Drug Abuse (NIDA) entitled, “Club Drugs,” Dr. Alan Leshner, Director, writes:

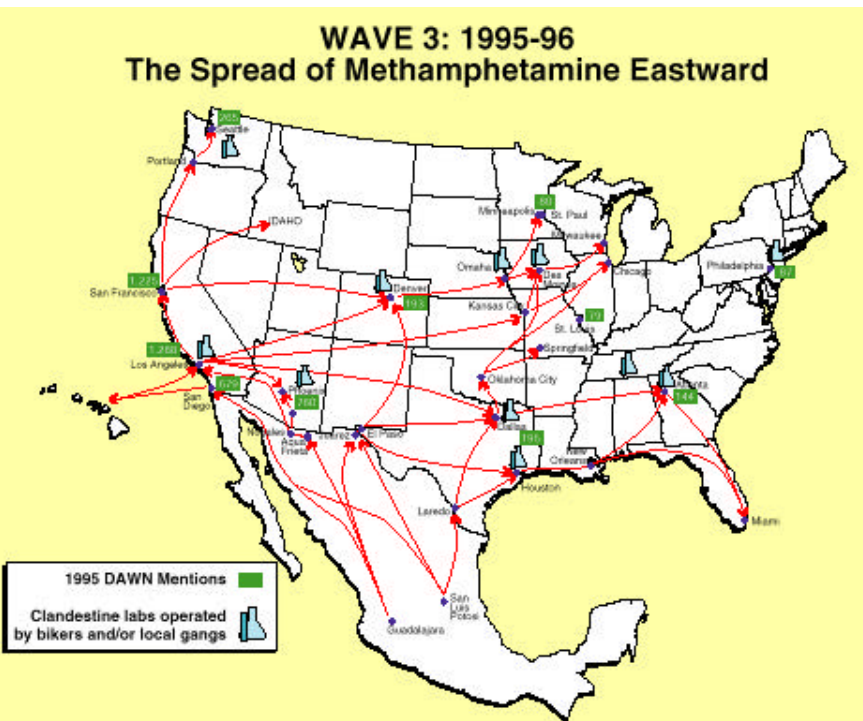
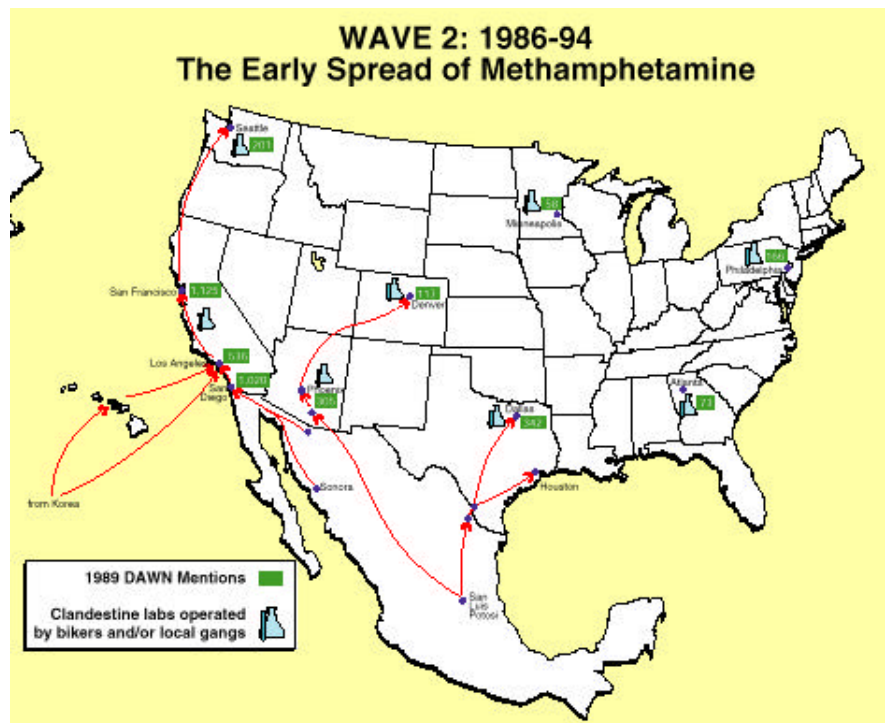
“A highly toxic and addictive drug called methamphetamine is now being used in many areas of the country. A number of indicators, including those from the National Institute on Drug Abuse’s (NIDA) Community Epidemiology Work Group (CEWG) and a new Multi-site Assessment of Methamphetamine Use, is clearly showing that this drug, once dominant in the West, is now spreading throughout the Midwest and into other areas of the country and emerging in cities and rural settings thought previously to be “untouched.” Not only is it spreading to new areas, but its use is increasing among populations not previously known to use this drug.

“The sum of our research shows that methamphetamine is a powerfully addictive stimulant associated with serious health conditions, including memory loss, aggression, violence, psychotic behavior, and potential heart and neurological damage. It also contributes to increased transmission of infectious diseases, especially hepatitis and HIV/AIDS.

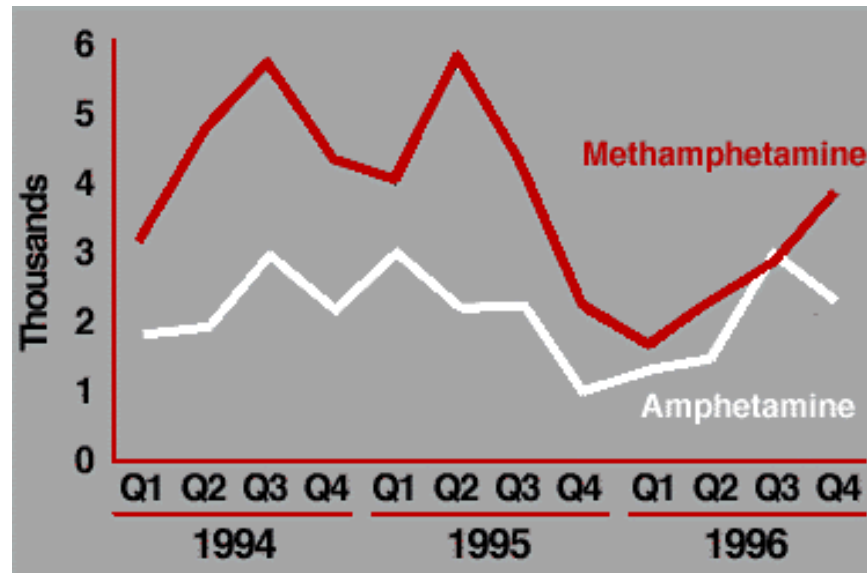
“To date, there are no safe and tested medications for treating methamphetamine addiction, although there are several behavioral treatments (such as individual and group counseling) that are showing positive results. NIDA supported researchers are working to develop effective medications to treat this addiction, as well as new methamphetamine antidotes for use by emergency room physicians to treat methamphetamine-related overdoses.”

Fetal exposure to methamphetamine also is a significant problem in the United States. At present, research indicates that methamphetamine abuse during pregnancy may result in prenatal complications, increased rates of premature delivery, and altered neonatal

behavioral patterns, such as abnormal reflexes and extreme irritability. Methamphetamine abuse during pregnancy may be linked also to congenital deformities.



The chart below illustrates quarterly emergency room episodes due to stimulant use were tracked from 1994 to 1996. A shortage of methamphetamine was reported by epidemiologists during the last half of 1995 accounting for the significant decrease in ER episodes.



Source: Drug Abuse Warning Network, SAMHSA, 1997

Although both methamphetamine and cocaine are psychostimulants, there are differences between them.		
Methamphetamine	vs.	Cocaine
Man-made		Plant-derived
Smoking produces a high that lasts 8-24 hours		Smoking produces a high that lasts 20-30 minutes
50% of the drug is removed from the body in 12 hours		50% of the drug is removed from the body in 1 hour
Limited medical use		Used as a local anesthetic in some surgical procedures

Wisconsin has seen only a few cases of methamphetamine abuse; however, those few have illustrated the lack of capacity to treat this addiction in our present treatment system. As shown in the maps, Wisconsin is in jeopardy from two fronts: from Illinois to our largest urban cities and from Iowa and Minnesota to our rural populations.

The Bureau of Substance Abuse Services plans to offer training at the Summer Midwest Institute in July in Madison. If you are interested in this topic, please contact Deborah Powers at (608) 266-9218 or email: powerdj@dhfs.state.wi.us.

The Bureau will also provide training to treatment providers who are interested in learning the best treatment approaches for these clients.

(For more information on Club Drugs, see the BSAS web site link at www.dhfs.state.wi.us/substabus/index.htm or go directly to the NIDA web site at www.nida.nih.gov/NIDAHome1.html)

Enhanced Substance Abuse Benefits Project: An Update

By Brian Shoup, Project Consultant

The Enhanced Substance Abuse Benefits task force held its initial meeting in Madison on January 11 with broad representation from industry, managed care interests, treatment providers and state government. The project is a major strategic undertaking by the State Council on Alcohol and Other Drug Abuse and the Bureau of Substance Abuse Services (BSAS) to bring together employers, payers and providers to develop ways of improving healthcare coverage for AODA treatment in the workplace. Among the companies, organizations, and institutions represented on the task force are Fort Atkinson Memorial Health Services, Theda Care, Covenant Behavioral Health, Saint Clare Center, Wisconsin Association on Alcohol and Other Drug Abuse (WAAODA), Consolidated Papers, Kimberly-Clark, Quad Graphics, General Motors, the Alliance, WI Manufacturers and Commerce Association, WI Association of Health Plans, WI Association of Life and Health Insurers, National Federation of Independent Businesses, Office of the Insurance Commissioner, WI State Legislature, WI Employee Trust Funds, Center for Health Policy and Program Evaluation, and WI Association for Addiction and Behavioral Health Services.

In his opening remarks to the task force, BSAS director Philip McCullough encouraged the members to think creatively as they embark on their work. "Let me assure all of you that the purpose

of this project is to search for collaborative solutions and not coercive ones," he said. McCullough also said that there were no preconceived strategies on the part of either the State Council or BSAS. "We're looking to you (the task force) for your recommendations a year from now."

Much of the first session was spent in opening dialogue regarding specific concerns of the various interest groups pertaining to current health plan provisions for substance abuse. Not surprisingly, employers and payer representatives expressed concerns about costs involved in any enhancement of benefits. They also spoke to the need for managed care mechanisms to control costs. However, any anticipated debate between providers and payers over the validity of managed care, never really materialized. Generally, the treatment providers seemed to have accepted the legitimacy of managed care although several expressed concerns about excessive micro management from some payers, which they felt, produced diminishing returns.

Perhaps the biggest surprise of the day was that most of the treatment providers expressed more concern for the need for greater flexibility rather than higher limits of coverage or more money. The issue of what procedures constitute substance abuse treatment as opposed to general medical care was also a problem identified by several providers who cited detoxification as an example. They contended that recently, some payers have been covering it under AODA benefits, which leaves less coverage available for primary treatment and continuing care.

The meeting concluded with a decision to appoint a smaller work group to develop a cost-benefit and utilization study, which will be presented to the task force at its March meeting.

Milwaukee Family Services Coordination Project

As part of last fall's "one-time" funded projects for expanded SA treatment for women and their families (see article in Winter 2000 issue), this project received a grant for a system-wide collaboration. The dialogue began in 1998 between three Department of Health & Family Services (DHFS) divisions: Supportive Living, Children and Families and Health Care Financing, and the Department of Workforce Development (DWD) Division of Economic Support. This dialogue addressed ways to help families achieve positive outcomes from the myriad of services provided between our two departments. What became apparent from these meetings was the need to integrate services, collaborate and coordinate through understanding of one another's systems, develop a mechanism to engage consumers and a process to identify, resolve barriers and evaluate the results.

The award of \$875,000 was divided between two Milwaukee agencies: *Wraparound Milwaukee* and *The Milwaukee Planning Council*.

The target population is comprised of families who are concurrently involved in W-2, Safety Services in the Child Welfare System,

Substance Abuse and Substance Abuse/Mental Health Treatment and present a broad spectrum of needs that currently are underserved and lack coordination between multiple systems.

The Project's vision is to develop an integrated service network that assists dependent and vulnerable families in gaining self-sufficiency by building upon their strengths and supporting them through formal and informal service networks for the target population.

Wisconsin FAS Family Outreach Project

By Georgiana Wilton, FEN Project Coordinator

[The following project is also funded through the one-time expanded treatment to women and their families through the Substance Abuse Prevention and Treatment Block Grant.]

The Family Empowerment Network (FEN) is a statewide resource, referral, and outreach program serving families and professionals affected by, or involved with, Fetal Alcohol Syndrome (FAS). FEN has recently received a grant from the Bureau of Substance Abuse Services. With this funding, the Wisconsin FAS Family Outreach Project will follow the model of the Sharing Treatment and Recovery for Women (STAR) project housed at the University of Wisconsin. The Wisconsin FAS Family Outreach Project will become part of Wisconsin's continuum of care for women's substance abuse treatment/ intervention services.

FEN will provide women and their families with on-site information, resources, and referrals, or provide this information in-home as needed. By providing families with comprehensive assessments and needs determination, and by continuing with individual follow-up and support, FEN plans to reduce the isolation commonly reported by families raising children with FAS. When isolation is reduced and early identification is made, work can take place in the decrease of occurrence of secondary disabilities experienced by children who may be affected, serve as a protective factor against relapse of family members, and serve as a protective factor for initial substance use by individuals affected.

FEN staff will provide the following services:

1. Initial training of Point of Contact lead agencies.
2. Ongoing training and technical assistance.
3. Monthly on-site inservice.
4. Response to family referrals from agency staff to include monthly visits to each resource desk being served by the project. Additional visits if warranted by referrals. During monthly site visits, FEN staff will conduct:
 - Informational meetings with family.
 - Identification of children at risk of FAS/FAE.
 - Diagnostic referrals as necessary (medical assessment).
 - Administration of FAS family assessment tool.
 - Family referrals and resources.
 - Individual family support and intervention as

required by a trained family counselor.

- Follow-up to family on an ongoing basis.

5. Local inservices, as requested.
6. Staff toll-free family/provider resource and referral line, and provide free resources to Wisconsin residents.
7. Initiate and provide consultation to regional family support groups.
8. Coordination of FAS Statewide Conference.
9. Collection, compilation, and dissemination of non-identifying family data.

FEN began in 1992 under the direction of Dr. Raymond Kessel of the UW-Madison. Its mission is to empower families affected by FAS/FAE through education, outreach, and support. It is FEN's goal to ensure that community "Points of Contact" have the latest information on FAS and FAE (Fetal Alcohol Effects). This includes: increasing awareness and providing education to families, providers, and the general public, providing resources, referrals, and support opportunities to families; providing technical assistance to providers and agencies; and networking with families, family support groups, and providers on a state and national level.

For additional information on this project, contact Georgiana Wilton at (608) 262-6590 or Raymond Kessel at (608) 263-6557.

Alcohol Awareness Month April 2000

"Let's Stop Underage Drinking Short"

The fourteenth annual campaign sponsored by the National Council on Alcoholism and Drug Dependence, Inc. (NCADD) will once again focus on youth with the slogan "Let's Stop Underage Drinking Short." Alcohol Free Weekend will be observed from Friday, April 7 through Sunday, April 9, 2000.

This year's honorary chair, New York Yankees' shortstop Derek Jeter, personifies the values that the community can encourage among the young people in Wisconsin. Jeter decided early on that he wanted to play ball for the New York Yankees. Staying away from alcohol and other drugs, as well as strong support from his family and community, helped him make his dream a reality.

Derek Jeter is the founder of *Turn 2 Foundation*. The Turn 2 Foundation supports and creates activities and programs that will motivate high-risk youths to turn away from drugs and alcohol and choose healthy lifestyles. They also reward academic achievement, leadership and good behavior. (<http://brands.bestfoods.com/skipturn2.asp>).

Materials to help communities conduct local Alcohol Awareness Month campaigns are now available on NCADD's web site (www.ncadd.org) or call NCADD at (800) 622-2255. They include sample press materials, suggestions

for grassroots activities and an order form for a variety of prevention posters and brochures.

2nd Alcohol Screening Day

The second annual National Alcohol Screening Day (NASD2000) will be held on April 5, 2000, at sites throughout the U.S. It is the nation's only large-scale education and screening program for alcohol problems and is co-sponsored by SAMHSA's Center for Substance Abuse Treatment (CSAT), the National Institute on Alcohol Abuse and Alcoholism and the National Mental Illness Screening Project. The first NASD took place on April 8, 1999. Nearly 30,000 of the 50,000 participants were screened at more than 1,700 sites nationwide.

NASD's 2000 mission is to provide free, anonymous screening for alcohol-related problems or concerns and connect those in need with local treatment resources. Registered screening sites are responsible for identifying and providing the screening clinicians, physical location and are responsible for conducting the screening program in their local communities or college campus. The sites will also identify treatment resources for those in need of services. For more information, contact the NASD 2000 office at (781) 239-0071 or visit the web site at www.nmis.org



RFP for Deaf & Hard of Hearing Treatment

The Request for Proposals (RFP) for the statewide Deaf, hard of hearing, and deafblind substance abuse program in the amount of \$125,000, will be available for application by the first part of March. A downloadable copy of the RFP will be on the BSAS Internet web site at www.dhfs.state.wi.us/substabuse/index.htm or you may request a copy by telephone (608) 267-7712 voice or (608) 267-9400 TTY.

Questions regarding this funding opportunity may be directed to Jamie McCarville at the previous phone numbers or by e-mail at mccarjm@dhfs.state.wi.us.

Outcomes Project Underway

Sixteen AODA providers from a variety of locations around Wisconsin are under contract to develop and report post-discharge outcomes on a sample of clients served. The contract is funded through the federal Center for Substance Abuse Treatment (CSAT) for \$565,000 for three years. The project will also design a client outcome questionnaire and a client severity index.

BSAS Snapshot



Sue Gadacz

Sue joined the Bureau of Substance Abuse Services on February 7, 2000. Sue is the SA Systems and Funding Development Specialist in the Program & Systems' Development Section. She will work with treatment providers, allied health care providers, third-party payment entities regarding service delivery as well as the Bureau's Uniform Placement Criteria program. Sue is located in Room 437, and her telephone number is 267-7704.

Sue comes to the Bureau from the Department of Workforce Development, DES, Bureau of Work Support Programs, where she was a policy analyst. She has experience in community mental health, and AODA counseling, case management and training. At DWD, Sue was staff coordinator of the Governor's W-2 & AODA Task Force. She also worked with the Bureau on the recent Statewide AODA RFP for women's treatment and the Milwaukee Family Services Coordination Project.

Uniform Placement Criteria 2000

An innovative UPC training plan is planned for summer. The instructional video has been completed, and the manuals and workbooks are being updated. UPC trainers are convening, and an instructional UPC game has been developed. Look on the Bureau's web site in May for more information as well as costs for the training package.

Statewide Outcome Measurement Training

Outcome measurement training, sponsored by BSAS and provided by United Way of Milwaukee, covered five regions of the state. Of the 159 people who participated, 65 of 72 counties were represented, and 107 completed all three sessions and have been issued certificates of completion.

Another round of training will be offered to the seven counties who were not represented, and will include sessions for the people who did not complete all three sessions the last time around.

As a follow-up, a one-day check-in meeting for regional participants as well as tribes (who have already received the training) will be held in the central part of the state to learn how people are using the training and what kind of follow-up is needed.

BSAS is exploring the possibility of putting together a PowerPoint presentation for the new trainers to utilize as they train others. This summer, the Midwest Institute in Madison will again offer an outcomes workshop. In addition, BSAS will provide an update at the fall Annual Statewide Meeting in Green Lake on any changes or new information that becomes available.

BSAS to Sponsor Teleconference Training

April 11 will kick off a new series of teleconference sessions to provide cutting-edge information on substance abuse issues. These monthly teleconferences will be held on the second Tuesday of each month from 10:00 a.m. to 11:00 a.m. Michael Bohn, M.D., a psychiatrist on staff with Gateway Recovery and an instructor with the University Wisconsin Medical School, will serve as teleconference facilitator.

This teleconference opportunity is offered to you as a service from the Bureau of Substance Abuse Services to enable AODA professionals around the state to conveniently share best practice information and consultation. Topics planned as BSAS News goes to print include the following:

- **April:** Working with spouses to facilitate treatment entry for addicts and alcoholics
- **May:** Assessment: drinking and drug use behavior and DSM-IV substance use disorder diagnoses
- **June:** Assessment: Axis I and II Comorbidity

- **July:** Assessment and outpatient treatment: withdrawal states.

Thirty lines have been reserved through Wisline (University of Wisconsin Extension), who will provide the teleconference services. Teleconference sites will be established in areas throughout the state that will have a reserved line. There will be a limited number of call-in lines available on a first-come, first-served basis. However, where possible, please participate in the teleconference at a site nearest you. A listing of teleconference sites will be distributed in a separate mailing and made available on the BSAS web site.

If you are interested in being a teleconference site, contact Jamie McCarville at (608) 267-7712 or E-mail: mccarjm@dhfs.state.wi.us,

SMART and MM Come to Wisconsin: Two New Self-Help Resources

By Henry Steinberger, Ph.D., Volunteer Professional Advisor to SMART and MM

SMART Recovery® (Self-Management And Recovery Training) and Moderation Management™ (MM) now offer their self-help groups in Wisconsin for people seeking to change their alcohol and drug use habits. In this issue we focus on SMART Recovery®.

These meetings emphasize skills supporting abstinence from all kinds of harmful addictive

behaviors while providing social support. The program has a scientific foundation consistent with the *Principles of Drug Addiction Treatment: A Research Based Guide*, published by the National Institute on Drug Abuse (NIDA, 10/99), which notes the organization is a useful adjunct to treatment. The program's volunteer professional advisors and coordinators receive expertly developed materials and training. Thirty-one Wisconsin correctional institutions and four Wisconsin cities now have SMART Recovery® meetings.

Meetings include open discussions of skills to enhance and maintain motivation to abstain, cope with urges and cravings, solve problems, balance momentary and enduring satisfactions. People learn by reading or listening, and teaching. Coordinators promote tolerance, empathy and empowerment. People feel encouraged, responsible for choices, free to pursue their chosen "higher values" and empowered to move beyond their addiction.

Many people say that they wish they had been told about SMART Recovery® and given choices regarding support groups when they first sought help. The cognitive-behavioral (thinking and doing) skills approach makes sense and the meetings feel friendly. Many people do not accept disease labels, spirituality, or powerlessness, though they have chosen abstinence to resolve problem addictions. People do attend other self-help groups, too, taking from each what they need.

SMART Recovery® as an educational non-profit organization can help a volunteer or agency to establish regular self-help meetings, either open to the public or just

within an agency. At www.smartrecovery.org, you can find information on meetings, including Internet meetings, help in starting new groups, training, self-help materials and more.

For Wisconsin meeting times call:

La Crosse: (608) 783-4737

Richard Straavaldsen;

Kenosha: (414) 658-8166 Tony Moore aodc@acronet.net

Tomah VA: (608) 372-3971 Gary Loethen;

Madison: (608) 256-5176 Henry Steinberger

[Dr. Steinberger and SMART would appreciate feedback on your experiences with SMART Recovery®. Please send your comments or questions to hsteinberger@earthlink.net]

MM will be covered in the next issue of *Substance Abuse News*.

Tribal Study Commences

Under a federal grant from the Substance Abuse and Mental Health Services Administration (SAMHSA), five tribes are under contract to check the alcohol and drug health of a sample of their members living on or near the reservation. Results are expected in early 2001.

Conferences

March 16-17, 2000. The 2nd Annual Statewide Conference of the Wisconsin Council on Problem Gambling (WCPG). WCPG's 2000 conference on Compulsive Gambling will be held at The Best Western Midway Hotel, Green Bay. Exhibit tables are available,

but space is limited. For more information on sponsorship, exhibits and the conference, contact Karin at the WCPG office: (920) 437-8888.

March 16-17, 2000. 2nd Annual Conference on Women and Special Topics in Addictions, *Women in Corrections: Relationships, Recovery, & Reconnection*. Best Western Midway Hotel, Brookfield, sponsored by the Waukesha County Council on Alcoholism and Other Drug Abuse, Inc. Keynote speaker is Stephanie S. Covington, clinician, consultant, author, recognized for her pioneering work on women's issues and addiction. The conference focuses on the specific alcohol and other drug abuse issues of women within the Criminal Justice System. Registration is \$115 for full conference but participants may attend Day 1 for \$95 or Day 2 for \$35. For information contact: Carol Hanneman-Garuz at (262) 524-7921, ext. 109, or e-mail: wiaoda@aol.com.

March 29-31, 2000. *Pharmacology of Drugs of Abuse*, a 3-part series presented by Tom Nelson, RPh, is a program of UW-Madison, Division of Continuing Studies. Register for one, two, or all three days at \$85/day or \$245/all. Location is Lowell Center, 610 Langdon Street, Madison. For further program information contact: Merrilee Pickett at (608) 263-8268 or email her at: mep@mail.dcs.wisc.edu

March 31 – April 1, 2000. The 7th Annual National Conference of the Family Empowerment Network (FEN), *Fetal Alcohol Syndrome in the New Millennium*, sponsored by UW-Madison. Location is The Pyle Center, 702 Langdon Street,

Madison, WI. Conference highlights include keynotes and workshops by presenters from six states on Fetal Alcohol Syndrome and Effects. Registration is \$125, with limited scholarships available. For further information, contact: Georgiana Wilton at (608) 262-6590 or toll free (800) 462-5254.

April 26-27, 2000. Wisconsin Aging Network Training, *Strengthening Caring Communities*, will be held in Madison at the Madison Concourse Hotel. Of interest to the SA/MH field is a workshop on Wednesday, April 26 entitled "Sharing the Wisdom: Building Mental Health and Substance Abuse Linkages to Combine Strengths." This workshop will highlight local efforts to improve how we serve older persons with MH and/or SA problems by maximizing what we do best and linking our promising practices together. There are many other offerings. For a brochure contact: Barbara Robinson at (608) 266-7498.

May 8-10, 2000. The 34th Annual WAAODA Spring Conference, *Defining and Building Excellence in the 21st Century*, Chula Vista Resort, Wisconsin Dells. This conference is a joint effort of the Wisconsin Association on Alcohol and Other Drug Abuse, Inc., Bureau of Substance Abuse Services, National Alliance for the Mentally Ill of Wisconsin, Wisconsin Council on Community Corrections and the Wisconsin Association of Alcohol and Drug Abuse Counselors, Inc. Included among the 30 planned workshops are the following: Dr. John Hesley, author of "Rent Two Films & Call Me in the Morning," using videos in psychotherapy; HFS75, Substance Abuse Standards;

AODA certification; practical skills training; an advanced counselor track; counseling basics and more. For more information or to request a brochure, call the WAAODA Office at 1-800-787-9979.

Save the Date

July 16-20, 2000. 46th Summer Midwest Institute, sponsored by the Wisconsin Department of Health and Family Services, the Michigan Department of Community Health, and in cooperation with training providers in Illinois, Indiana, and Ohio. Contact Deborah Powers, BSAS, PO Box 7851, Madison, WI 53707, (608) 266-9218 or e-mail: powerdj@dhfs.state.wi.us.

Awards (from page 1)

Twenty-eight applications were received from qualified applicants across the state, one of which was a consortium of 42 treatment agencies and their human services system through a single application organized by the Milwaukee County Department of Human Services. Following are the eight agencies receiving awards:

Milwaukee County Department of Human Services, Ralph Hollmon, Project Director, 235 W. Galena, Milwaukee, WI, on behalf of a consortium, which includes: United Community Center, Milwaukee Women's Center, Our Home Foundation (META

House), and S.A.F.E. Group Services, Inc. for the Milwaukee project: "Milwaukee AODA/TANF Services System."

ARC Center for Women & Children - ARC Community

Services, Inc. (Dane County), Project Director, Terry Bucheger, 2001 W. Beltline Hwy. #102, Madison, for their urban project: *"Integrated AODA & Work Services for Women and their Families in Dane County."*

ARC Community Services, Inc. (Fond du Lac County), Judy K. Baldwin, Project Director, 2001 W. Beltline Hwy. #102, Madison, for their urban project: *"Fond du Lac Women's & Children's Services."*

Family Services of Northeast WI, Inc. (Brown County), Lois Mischler, Project Director, 300 Crooks Street, Green Bay, for their urban project: *"Intensive Outpatient AODA Treatment Program for Women and their Families."*

Lutheran Social Services of WI & Upper MI, Inc. (Eau Claire County), Ted Hakala, Project Director, 3136 Craig Road, Eau Claire, for their urban project: *"Women's AODA Treatment Programs/TANF."*

Human Service Center (on behalf of Northwoods

Consortium: Forest, Oneida, and Vilas Counties), Mark Strosahl, Project Director, 240 Maple Street, P.O. Box 470, Rhinelander, for their rural project: *"Tri County Women's Outreach Project."*

SSM of Wisconsin, c/o St. Clare Hospital & Health Services (Adams, Columbia, Grant, Juneau, Marquette, Richland, Sauk Counties and the Ho-Chunk Nation), Norman Briggs, Project Director, 707 Fourteenth St., Baraboo, for their rural project: *"Women's Independence Network."*

CCSA - Washington County (Washington County), Jim Strachota, Genesis Behavioral Services, Inc., 333 E. Washington

St., Ste 2100, West Bend, for their rural project: *"Comprehensive Women's Services Program."*

Wisconsin AODA Facts

From "Wisconsin Alcohol and Other Drug Abuse Factsheet: 1997" by Mike Quirke.

- A 1997 Wisconsin household survey that checked the alcohol and drug health of 8,460 adults and 1,075 adolescents found that 9.8 percent of the adults and 8.3 percent of the adolescents were in need of treatment for alcohol or other drug disorders. This means that there are 353,075 adults and 40,300 adolescents in need of treatment statewide.
- Seventy (70) percent of Wisconsin adults consume at least some alcohol. The majority who do drink, consume alcohol on four or fewer days each month and have one or two drinks on each occasion. Only 6 percent of Wisconsin adults use illicit drugs like marijuana, cocaine, speed, and the like.
- Fifty-one (51) percent of adolescents age 14-17 report drinking at least some alcohol. Twenty-one (21) percent reported recent use of illicit drugs. The survey found that adolescents who did not use alcohol or other drugs reported better health than those who were using.
- While the majority of Wisconsin women stop drinking alcohol during pregnancy, 32 percent of the sample of 570 pregnant women reported drinking alcohol during pregnancy. Of the estimated 67,600 pregnancies

in Wisconsin each year, one-third are at increased risk of birth and developmental defects.

- In a study of 460 Wisconsin adult offenders, 39 percent tested positive for an illicit drug. The test was performed within 48 hours after they were booked into jail. The Milwaukee sample had a rate of 55 percent. 32 percent of the sample of offenders had treatment needs.
- In 1997, there were 21,527 arrests for the possession, sale, or manufacture of illicit drugs.
- In the public sector, Wisconsin provides alcohol and other drug abuse services to 58,650 persons each year, spending about \$63.2 million; 41,320 of these receive treatment or rehab services. The economic benefit from these services is estimated to be over \$442 million resulting in savings on welfare, criminal justice system costs, property damage and loss, unemployment, industry costs, medical care, injury, and early death.
- In 1997, there were 659 alcohol poisoning deaths and 225 illicit drug poisoning death.
- In 1997, there were 8,448 alcohol-related traffic crashes resulting in 6,797 injuries and 309 deaths; 37,437 persons were arrested for intoxicated driving.



From the Director

For the last few months, we have searched for individuals who have successfully worked their substance abuse recovery program and would be willing to serve on various statewide committees. The voice of the consumer is urgently needed at all levels. Consumers, particularly those in recovery, are in the best position to contribute in a meaningful way as they relate their experience of what worked

and why, both in treatment and toward recovery. They are true experts with a unique perspective and can collectively help shape policy. Secondly, consumers who are successfully managing their recovery provide living testimony that recovery is not merely a possibility but an attainable reality.

Statistical indicators of substance abuse and estimates of its economic impact continue to reveal a significant problem causing the general public and policy makers to ask: Does treatment work, and do people get better? The answer is an emphatic YES!

Wisconsin and national studies show that 30-40 percent of persons treated for substance use disorder recover. These recovery rates are comparable to those obtained with illnesses such as diabetes, asthma, and hypertension.

But even after the facts are sorted out, it is people who are successfully working their recovery that demonstrate a powerful human truth:

- They illustrate that recovery is not only possible but likely.
- They serve as role models for those struggling with recovery.
- They can reach back, mentor, and instill hope.
- They stand in the face of society opinion and defeat stigma.

The list goes on, and the benefit of involving consumers in policy, planning, and decision-making is invaluable.

The substance abuse treatment field needs recovering people to sit at the table where decisions are made on policy and funding. We need you as evaluators and advisors. We need you on our substance abuse planning bodies, on our grant review teams, in our workshops presenting or giving testimony in many venues.

It is our intent to develop a pool of consumers so that no one person has to "do it all," and so that we can accommodate interests, skills, schedules, and anonymity as desired. If you are interested in joining us in our mission to represent the recovering community, call the Bureau at (608) 267-7164, e-mail to langejb@dhfs.state.wi.us, or send a letter of interest to Philip McCullough, Bureau of Substance Abuse Services, PO Box 7851, Madison, WI 53707-7851.

Substance Abuse News

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The Bureau of Substance Abuse Services in the Department of Health and Family Services' Division of Supportive Living endeavors to increase the quantity and improve the quality of prevention, intervention and treatment programs serving persons with substance abuse problems and their families; improve coordination among state agencies and within DHFS having responsibilities for substance abuse services; and improve substance abuse work force training and development.

Substance Abuse News is published quarterly by the Department of Health & Family Services, Division of Supportive Living, Bureau of Substance Abuse Services. Contents may be reproduced without permission.

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Summer Issue Deadline
May 5, 2000

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